FOR INSTRUCTIONS, SEE BACK OF FORM	
	IA ETHICS AND FORM STATEMENT
CHECK ONE:	A LOBE TALL I UF
inis is an initial . Statement of Organization	(Rev. 04/2008) ORGANIZATION
☐ This is an amended* Statement of Organization *An initial Statement of Organization must be filed within 10 days of 2011	For Office Use Only 15/1
making expenditures, or incurring indebtedness exceeding \$750. Amenda	ments must be filed within 30 days of Indexed
a change. Penalties may be imposed for late-filed Statements of Organiz	ation. A candidate with an open Audited
committee that exceeds \$750 in activity for another office shall file within DR-1 disclosing information concerning the campaign for the new office s	10 days either a new or amended Computer do La La VI
COMMITTEE NAME ↓ ↓ (A candidate's committee must include the	he candidate's last name in the name of the committee.)
rettengill for lowans	
IMPORTANT: Indicate type of committee you are reporting for:	
(1) Statewide/Legislative/Judge Standing for Retention Candidate (5) County Candidate (6) City Candidate (7) School Board or Other	2)Statewide PAC (3)State Party (4)County Central Committee
(10) School Board or Other Political Subdivision PAC (11) Local Ba	allot Issue (including committee involved in multiple city/county ballot issues)
Name ↓ ↓ / AAA A	COMMITTEE CHAIR (mandatory except for a candidate's committee) Name ↓ ↓
LEE KERRY MOFFBEE	Name V V
Mailing Address 6 191 33 RO AVE DR	Mailing Address ↓ ↓
V City, State ↓ ↓ Zip Code ↓ ↓	City, State ↓ ↓ Zip Code ↓ ↓
hells burg Sherisburg 14 52332 Phone (3/9) 436-2626 52332	
Fridite (0/1)	Phone ()
e-Mail K. ALCABEE @ GMALL. COM	e-Mail
INDICATE PURPOSE OF COMMITTEE - Check One Box Ac Comment or description:	dvocate for/against candidate(s) Advocate for ballot issue(s) Advocate against ballot issue(s)
All Candidates Enter: Office Sought: STATE REPRESENTATIVE	County/Local Candidates and Local Ballot Committees Enter:
Office Soughi. STATE ACT PC DE TOTAL TO	County:
Political Party (if applicable) REPUBLICAN	(If active in multiple ballot issue elections, attach list of counties
District:	Date of Election:
Year Standing for Election:	Dute of Licouoti.
Bank Account Name (must match committee name)	Candidate name & Address or Parent Entity (PACs, if applicable),
Pollosoill Confessor	Affiliate, or Sponsor
rettengill for lowans	Dawn Yettengill
Name of Financial Institution/type of Account ↓↓	Mailing Address ↓ ↓
	P.O. BOX 76
Ledar Valley Bank	
Cedar Valley Bank Mailing Address + + -	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City ↓ ↓ State ↓ ↓ Zip ↓ ↓
Mailing Address ↓ ↓ ∪	City State Zip M+. Auburn 1A 52349
Mailing Address \downarrow	City + State + Zip + FANDUM 1A 52349 Phone (319) 475-2276
Mailing Address 405 W. 3rd 4.	City State Zip M+. Auburn 1A 52349
Mailing Address \downarrow \downarrow \cup \bigcirc	City State J Zip J J MH. AVBURN 1A 52349 Phone (319) 475-2276 e-Mail dawn pettengill Dymail. Com
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Mailing Address 405 W. 3 rd 4. City	City State 1 Zip 1 D 349 Phone (319) 475-2276 e-Mail dawn pettengill & gmail. Com firms the following: at they are subject to the laws in lowa Code chapters 68A and 68B and the administrative
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